

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035085

FILED
Apr 05, 2011
Secretary of State

Entity Name: PETER LACZKO INSURANCE, INC.

Current Principal Place of Business:

310 PAPER TRAIL WAY STE 106
HOLLY SPRINGS, GA 30115

New Principal Place of Business:

310 PAPER TRAIL WAY STE 107
HOLLY SPRINGS, GA 30115

Current Mailing Address:

310 PAPER TRAIL WAY STE 106
HOLLY SPRINGS, GA 30115

New Mailing Address:

310 PAPER TRAIL WAY STE 107
HOLLY SPRINGS, GA 30115

FEI Number: 90-0060489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACZKO, PETER
367 QUEBEC CT
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: LACZKO, PETER K
Address: 310 PAPER TRL WAY 107
City-St-Zip: CANTON, GA 30115

Title: O
Name: LACZKO, LISA M
Address: 310 PAPER TRL WAY 107
City-St-Zip: CANTON, GA 30115

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PETER LACZKO

PRES

04/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date